



CANNON BUILDING
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DOVER, DELAWARE 19904-2467

STATE OF DELAWARE
BOARD OF LANDSCAPE ARCHITECTURE

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LANDSCAPE ARCHITECTURE ACKNOWLEDGEMENT OF PROFESSIONAL IN CHARGE

INSTRUCTIONS

Applicant: Arrange for *each* person listed in your application to sign and seal this form.

Professional In Charge: If the seal is a stamp, upload this document to the business' Certificate of Authorization license in DELPROS. If the seal is raised, mail this document directly to the Board Office at the above address.

1. Applicant Application ID: _____
2. Applicant Name: _____
Last First Middle

INFORMATION ABOUT PROFESSIONAL IN CHARGE

3. Name of Delaware Licensed Professional in Charge: _____
4. DE Landscape Architect License Number: **SA-**_____

ACKNOWLEDGEMENT

5. I acknowledge that I have been designated as a person in responsible charge of and/or for direct supervision of landscape architecture services offered or provided in Delaware by the corporation or partnership named above. I understand that the Board must be notified within 30 days if I am no longer associated with or acting in this capacity for this corporation or partnership.

Signature of Professional in Charge: _____ Date: _____

IF THE SEAL IS A STAMP, UPLOAD THIS DOCUMENT TO THE BUSINESS' CERTIFICATE OF AUTHORIZATION LICENSE IN DELPROS.

IF THE SEAL IS RAISED, MAIL THIS DOCUMENT DIRECTLY TO THE BOARD OFFICE AT THE ADDRESS ABOVE.